

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER		
TYPIST	566	2-25-95
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

# BEST AVAILABLE COPY INDEX OF CLAIMS

Claim	Date
Final Original	
1	5-11-95
2	6-5-96
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*independent claims*  
*65, 71, 74, 75, 87, 95 = DWT*  
*76 = hand old*

SYMBOLS  
 ✓ Rejected  
 = Allowed  
 (Through numeral) Canceled  
 \* Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
Final Original	
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